

IN THE UNITED STATES PATENT AND TRADEMARK OFFICE

Applicant:

Patrick J. Sweeney

Title:

SPINAL DISC PROSTHESIS

SYSTEM

Appl. No.:

Filing

Submitted Herewith

Date:

Examiner:

Art Unit:

UTILITY PATENT APPLICATION TRANSMITTAL

Mail Stop PATENT APPLICATION Commissioner for Patents PO Box 1450 Alexandria, Virginia 22313-1450

Sir:

Transmitted herewith for filing under 37 C.F.R. § 1.53(b) is the nonprovisional utility patent application of:

Patrick J. Sweeney 1711 Pinehurst Lane Flossmoor, Illinois 60422

[] Applicant claims small entity status under 37 CFR 1.27.

Enclosed are:

- [X] Specification, Claim(s), and Abstract (23 pages).
- [X] Informal drawings (17 sheets, Figures 1-17).
- [X] Unexecuted Declaration and Power of Attorney (3 pages).

Assignment of the invention to Spinal Generations.
Assignment Recordation Cover Sheet.
Small Entity statement.
Request for application not to be published with certification under 35 USC 122(b)(2)(B)(i).
Information Disclosure Statement.
Form PTO/SB/08 with copies of ___ listed reference(s).
Application Data Sheet (37 CFR 1.76).

The filing fee is calculated below:

Claim for Convention Priority.

[]

******	Claims as Filed		ncluded in Basic Fee		Extra Claims		Rate		Fee Totals
Basic Fee	, 141 (- 1).			,		-	\$750.00		\$750.00
Total Claims:	27	-	20	=	7	×	\$18.00	=	\$126.00
Independents:	5		3	. ⇒	2	х	\$84.00	=	\$168.00
If any Multiple Dependent Claim(s) present:					 	+	\$280.00	=	\$0.00
Surcharge under 37 CFR 1.16(e) for late filing of Executed + Declaration and late payment of filing fee \$130.00							=	\$130.00	
							SUBTOTAL:	=	\$1174.00
[]	Small Entity Fees Apply (subtract ½ of above):							=	\$587.00
					TOT	AL F	ILING FEE:		\$587.00

- [] A check in the amount of \$0.00 to cover the filing fee is enclosed.
- [X] The required filing fees are not enclosed but will be submitted in response to the Notice to File Missing Parts of Application.
- The Commissioner is hereby authorized to charge any additional fees which may be required regarding this application under 37 C.F.R. §§ 1.16-1.17, or credit any overpayment, to Deposit Account No. 50-2350. Should no proper payment be enclosed herewith, as by a check being in the wrong amount, unsigned, post-dated, otherwise improper or informal or even entirely missing, the Commissioner is authorized to charge the unpaid amount to Deposit Account No. 50-2350.

Please direct all correspondence to the undersigned attorney or agent at the address indicated below.

Respectfully submitted,

Michelle Manning

Attorney for Applicant Registration No. 50,592

7/15/03

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PATENT APPLICATION

IN THE UNITED STATES PATENT AND TRADEMARK OFFICE

Applicants: Patrick J. Sweeney Date: July 15, 2003

Title: SPINAL DISC PROSTHESIS SYSTEM

Docket No.: 029815-0101

Mail Stop PATENT APPLICATION Commissioner for Patents P. O. Box 1450 Alexandria, VA 22313-1450

> "Express Mail" Mailing Label No.: EV 246426271 US Date of Deposit: July 15, 2003

I hereby certify that these attached documents

- * Patent Application Transmittal (3 pages)
- * Patent Application (23 total pages: Spec. 17 pages; Claims 5 pages; Abstract 1 page)
- * Declaration and Power of Attorney (unsigned) (3 pages)
- * Seventeen (17) Sheets of Formal Drawings (Figs. 1-17)
- * Application Data Sheet (3 pages)
- * Return postcard

are being deposited with the United States Postal Service "Express Mail Post Office to Addressee" service under 35 C.F.R. § 1.10 on the date indicated above and is addressed to Mail Stop PATENT APPLICATION, Commissioner for Patents, P.O. Box 1450, Alexandria, VA 22313-1450.

Enclosed for filing please find the above-referenced utility patent application. Please indicate receipt of this utility patent application by returning the attached postcard with the official Patent and Trademark Office receipt stamped thereon.

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